

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T-G		8/14/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	BZ	897	09-11-01
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 : Restricted O Objected

Claim	Date
1	01-01-01
2	01-02-01
3	01-03-01
4	01-04-01
5	01-05-01
6	01-06-01
7	01-07-01
8	01-08-01
9	01-09-01
10	01-10-01
11	01-11-01
12	01-12-01
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28	01-28-01
29	01-29-01
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31	01-31-01
32	01-32-01
33	01-33-01
34	01-34-01
35	01-35-01
36	01-36-01
37	01-37-01
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40	01-40-01
41	01-41-01
42	01-42-01
43	01-43-01
44	01-44-01
45	01-45-01
46	01-46-01
47	01-47-01
48	01-48-01
49	01-49-01
50	01-50-01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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